PTO/SB/17 (10-08) Approved for use through 06/30/2010. OMB 0651-0032

Under the Paperwork Reduc	respond to a collection of information unless it displays a valid OMB control number							
Effective on 12/08/2004.				Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Application Number		10/553,969-Conf. #9996		
FEE TRANSMITTAL				Filing Date		October 19, 2005		
For FY 2009				First Named Inventor Peter KERN				
				Examiner Name S. Tawfik				
Applicant claims small entity status. See 37 CFR 1.27				Art Unit 3721				
TOTAL AMOUNT OF PAYMENT (\$) 490.00				Attorney Docket No. 5707-0102PUS1				
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filling fee								
x Charge any additional fee(s) or underpayments of fee(s) under 37 CFB 1.16 and 1.17								
FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
I Briolo Fillinto, Gillinton		3 FEES		ARCH FEES	EXAMINA	ATION FEES		
l		Small Entity	"	Small Entity	Fee (\$)	Small Entity Fee (\$)	Foor F	Paid (\$)
Application Type	Fee (\$) 330	Fee (\$) 165	Fee (\$	5) <u>Fee (\$)</u> 270	220	110	rces	alu (a)
Utility			100		140	70		
Design	220	110			170	85		
Plant	220	110	330					
Reissue	330	165	540		650	325		
Provisional	220	110	0	0	0	0		
2. EXCESS CLAIM FEES Small Entity Fee (\$) Fee (\$)								
Fee Description Each claim over 20 (including Reissues) 52 26								
Each independent claim over 3 (including Reissues) 220 110								110
Multiple dependent claims 390 195								
				ee Paid (\$) Multiple Depende			ent Claims	į
27 - 27 or HP x =				Fee (S)			ee Paid (\$	<u>3)</u>
HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims								
6 -6 or HP = x =								
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
- 100 = /50 = (round up to a whole number) x =								
4. OTHER FEE(S) Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): 1252 Extension for response within second month 490.00								
SUBMITTED BY	105							
Signature UU	ui,	mun		Registration No. (Attorney/Agent)	29,271	Telephone	(703) 20	5-8000
Name (Print/Type) Charles Gorenstein Date November 23, 2009								
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